

Drug Use and Abuse in San Diego County, California: 2013

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ABSTRACT

The most significant change observed in drug use/abuse indicators in San Diego County in 2013 was an increase in several indicators related to methamphetamine use, after decreasing from peak levels in 2005 and showing mixed indicators in 2011 and 2012. Positive urinalysis results for methamphetamine use increased in 2013 among adult male arrestees and juvenile arrestees, and adult female arrestees showed a similar increasing trend over the longer term. The number and rate of overdose deaths involving amphetamine (including methamphetamine) increased from 116 (3.7 per 100,000 population) in 2012 to 169 (5.4 per 100,000) in 2013. Methamphetamine continued to rank first among reports from drug items seized and analyzed in National Forensic Laboratory Information System (NFLIS) laboratories. Street prices for methamphetamine were lower in 2013 compared with 2012. Cocaine/crack indicators were low overall and have been stable since 2010. Prevalence of positive tests for cocaine among arrestees was mostly stable, with small (1–2 percentage point) and mixed changes; positive urinalysis results for cocaine were slightly down among adult males and juveniles and slightly up among adult females. Cocaine ranked second among total reports from drug items seized and analyzed in NFLIS laboratories. Marijuana prevalence among arrestees increased in all three groups tested (adult males, adult females, and juveniles), and marijuana street prices decreased compared with 2012. Marijuana ranked third in NFLIS data, representing 12 percent of primary, secondary, and tertiary reports. Heroin indicators were mostly stable from 2012 to 2013, but the longer term gradual increase in heroin/morphine-related overdose deaths remained a local concern. Prevalence of heroin-positive urinalysis test results among arrestees remained mostly stable with small (1–2 percentage point) and mixed changes; positive results for heroin were slightly up among adult males and females and slightly down among juveniles. It should be noted that the urinalysis test upon which this indicator is based cannot discern between heroin and prescription opioids. Heroin ranked fourth among reports from drug items seized and analyzed by NFLIS laboratories, with 11 percent of primary, secondary, and tertiary reports testing positive for heroin. Drug treatment admissions data for 2013 were unavailable at the time of this report.

INTRODUCTION

Area Description

San Diego County is the southwestern-most county of California and shares 80 miles of border with Mexico. The San Ysidro border crossing, which links San Diego with its sister city of Tijuana, Mexico, is the busiest border crossing in the world, accommodating approximately 40 million legal crossings annually. Both Tijuana and San Diego County are located on major drug trafficking routes

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that bring illicit drugs from Mexico and South America to the United States. In particular, San Diego is a major transshipment point for both methamphetamine and marijuana. San Diego County's total population was reported at more than 3 million in 2010 (exhibit 1). The county is home to a growing Hispanic (predominantly Mexican) population. Overall, 32 percent of county residents are Hispanic, and 48 percent are White non-Hispanic. Smaller proportions of the population are Asian and Pacific Islander (11 percent), non-Hispanic African-American (5 percent), American Indian (less than 1 percent), and other races/ethnicities (3 percent) (exhibit 1).

Data Sources

The data sources used in this report are listed below:

- **Arrestee data** were provided by the San Diego Association of Governments (SANDAG) Substance Abuse Monitoring program, a regional continuation of the Federal Arrestee Drug Abuse Monitoring program that was discontinued in 2003. This report presents preliminary 2013 urinalysis-positive data for adult ($n=920$) and juvenile ($n=134$) arrestees.
- **Drug price data** came from the San Diego Law Enforcement Coordination Center's "Street Drug Price List (January 2014)," which reports on street-level drug buys conducted in San Diego County.
- **Forensic laboratory data** came from the National Forensic Laboratory Information System (NFLIS), Drug Enforcement Administration (DEA), for 2013. These data were queried on May 9, 2014. A recent change in NFLIS methodology allows for the accounting of up to three drugs per item submitted for analysis. The numbers of NFLIS reports now include primary, secondary, and tertiary substances for crime laboratory items analyzed and provide a more complete surveillance than when only the primary substance detected was reported. Because of this change, it is not appropriate to compare the current NFLIS data with those in CEWG reports prior to 2011.
- **Treatment data** were provided by the San Diego Department of Alcohol and Drug Programs (tables produced by the California Department of Alcohol and Drug Programs) using the California Outcomes Measurement System (CalOMS). CalOMS is a statewide client-based data collection and outcomes measurement system for alcohol and other drug (AOD) prevention and treatment services. Submission of admission/discharge information for all clients is required of all counties and their subcontracted AOD providers, all direct contract providers receiving public AOD funding, and all private pay licensed narcotic treatment providers. CalOMS was implemented in early 2006 (replacing the earlier California Alcohol and Drug Data System [CADDSS]); data reported for periods prior to July 2006 may not be comparable to more recent periods. Data for the 2013 calendar year were unavailable at the time of this report; therefore, this report includes previously reported data on admissions to San Diego County for the period January–December 2012 (exhibits 2a and 2b).
- **Mortality data** were obtained from the Emergency Medical Services Medical Examiner Database, which is maintained by the County of San Diego Health and Human Services Agency.
- **Acquired immunodeficiency syndrome (AIDS) data and human immunodeficiency virus (HIV) data** are reported biennially in the San Diego County Health and Human Services Agency's HIV/AIDS Epidemiology Report. No new reports have been issued during this reporting period;

therefore, data from the 2012 HIV/AIDS Epidemiology Report (including data through December 31, 2011) are included herein.

DRUG ABUSE PATTERNS AND TRENDS

Cocaine/Crack

Cocaine remained a low-level drug in San Diego County. A decreasing trend that began in 2007 began to plateau in 2011, and indicators have remained low and relatively stable after 2011. Cocaine treatment admissions data in the previous reporting period (2012) were fairly stable compared with previous years, accounting for approximately 4 percent of total admissions (exhibits 2b and 3). The demographic characteristics of cocaine users in 2012 were mostly unchanged from 2011. Three-quarters (75.3 percent) of cocaine admissions in 2012 were age 35 or older; slightly more than two-thirds (67.6 percent) were male; and nearly two-thirds (64.5 percent) were African-American non-Hispanic. The majority (77.2 percent) reported smoking as their primary route of administration. A majority (69.9 percent) cited at least one secondary substance of abuse, most commonly alcohol (30.8 percent) or marijuana (22.6 percent) (exhibit 3).

Among adult arrestees, 6 percent of adult males and 7 percent of adult females tested urinalysis-positive for cocaine in 2013; this represented a 2-percentage-point decrease for males and a 2-percentage-point increase among females since 2012 (exhibit 4). This is compared with a high of 11 percent among males and 16 percent among females in 2007. Juvenile prevalence decreased from 3 percent in 2012 to 1 percent in 2013.

Cocaine ranked second overall among reports from drug items seized and analyzed in San Diego County NFLIS laboratories, with 12 percent of primary, secondary, and tertiary reports testing positive for cocaine (exhibit 5). Cocaine prices in San Diego County have remained relatively stable since 2008 (exhibit 6).

Heroin

Overall, heroin indicators in 2013 were relatively stable when compared with 2012, but they suggest a gradual upward trend since 2006. In the previous reporting period (2012), heroin accounted for 23.1 percent of all treatment admissions ($n=3,328$ primary treatment admissions for heroin; exhibits 2a, 2b, and 3); this represented a slight increase from 22.0 percent in 2011 and 21.4 percent in 2010. Clients admitted to treatment in 2012 for heroin were predominantly male (70.9 percent) and were mostly White non-Hispanic (63.4 percent). Treatment admissions data suggested that individuals admitted to treatment for heroin were increasingly younger. Clients younger than 35 constituted the majority (65.8 percent) of heroin admissions in 2012. This proportion was stable since 2011 (65.6 percent), but it represents a longer term gradual trend, increasing from 63.2 percent in 2010 and 55.7 percent in 2009. The primary route of administration also appears to be changing over the long term, with a smaller proportion of primary admissions reporting injection as their preferred route. The proportion of heroin admissions reporting injection as their primary route of administration in 2012 was 71.7 percent, compared with 69.0 percent in 2011, 72 percent in 2010, 75 percent in 2009, and 78 percent in 2008. Almost two-thirds (62.0 percent) of heroin admissions reported at least one secondary drug of abuse. The most common secondary drugs reported were

methamphetamine (27.3 percent), marijuana (11.2 percent), alcohol (8.0 percent), and cocaine/crack (5.4 percent) (exhibit 3).

Heroin/opiate urinalysis-positive prevalence among adult arrestees was 11 percent among males and 14 percent among females in 2013. This represents an increase of 1 percentage point among males and 2 percentage points among females since 2012, continuing a gradual upward trend since 2007 (exhibit 4). Among juvenile arrestees, 1 percent tested positive for heroin/opiates in 2013, compared with 3 percent in 2012, 2 percent in 2011, and 5 percent in 2010. It should be noted that the urine test upon which this indicator is based cannot discern between heroin and prescription opioids.

Heroin ranked fourth among reports from drug items seized and analyzed in NFLIS laboratories in San Diego County, with 11 percent of primary, secondary, and tertiary reports identified as heroin (exhibit 5).

In 2013, there were 129 overdose deaths involving heroin/morphine in San Diego County (4.1 per 100,000 population), compared with 114 in 2012 (3.6 per 100,000) (exhibit 7). Overdose deaths are based on preliminary Medical Examiner data, so the number could change as more cases are closed.

The street price of heroin was mostly stable in 2013. The price for one-quarter gram decreased slightly, from \$25–\$40 in 2012 to \$20–\$25 in 2013. Prices for gram, ounce, and pound quantities showed smaller but mixed changes (exhibit 6).

Oxycodone and Other Prescription Opioids/Synthetics

In the previous reporting period (2012), there were 670 treatment admissions for oxycodone and other opioids/synthetics in 2012, representing 4.7 percent of all admissions. This is compared with 580 treatment admissions (4.2 percent) in 2011 and 576 (4.1 percent) in 2010 (exhibits 2 and 3). Of the 2012 admissions for prescription opioids, 318 admissions were for oxycodone/OxyContin®, and 352 were for other opioids/synthetics.

The number and proportion of oxycodone admissions has been gradually decreasing since 2008, while the number and proportion of other opioids/synthetics has been gradually increasing. In 2012, both classes increased slightly. In 2012, primary treatment admissions for prescription opioids were about one-half male (54.8 percent). Fifteen percent of admissions for prescription opioids were younger than 26; 37.6 percent were age 26–34; and 45.8 percent were age 35 or older. The majority (74 percent) reported White non-Hispanic race/ethnicity. The majority reported oral administration (86.6 percent), although some admissions reported sniffing (7.0 percent), injection (3.1 percent), or smoking (2.5 percent) as their preferred route of administration. Forty-nine percent of primary admissions reported no secondary drug of abuse, compared with 60.0 percent in 2011. The most commonly reported secondary drugs were heroin and marijuana, at 8.4 percent each (exhibit 3).

Of the drug reports identified among items seized and analyzed by NFLIS laboratories for San Diego County in 2013 (exhibit 5), 342 (2.8 percent of all reports) were identified as hydrocodone. Hydrocodone ranked fifth among total drug reports identified in 2013, behind methamphetamine, marijuana/cannabis, cocaine, and heroin. Also identified were 190 oxycodone reports (1.6 percent of total reports), ranking oxycodone seventh among drug reports. Morphine, buprenorphine, methadone, codeine, and hydromorphone each represented 1.0 percent or less of reports in 2013.

Methamphetamine

Methamphetamine indicators appeared to increase in 2013, with the exception of drug treatment admissions, which were unavailable at the time of this report. In the previous reporting period (2012), the proportion of primary treatment admissions for methamphetamine decreased by 1 percentage point to 28 percent in 2012, following 3 years in which methamphetamine accounted for 29 percent of admissions. Nonetheless, primary methamphetamine treatment admissions continued to account for the highest proportion of treatment admissions in San Diego in 2012 (exhibit 2). The demographics of primary methamphetamine admissions have been fairly stable since 2010. A majority of the methamphetamine treatment admissions in 2012 were male (58.1 percent). Almost one-half (49.0 percent) were White non-Hispanic, and 34.9 percent were Hispanic, showing an overall racial and ethnic distribution similar to that of the San Diego population. The most common route of administration reported by primary methamphetamine admissions in 2012 was smoking (72.4 percent), followed by injection (18.9 percent). More than two-thirds of clients (65.1 percent) reported at least one secondary drug of abuse. The most common secondary drug among primary methamphetamine clients was marijuana (28.2 percent), followed by alcohol (23.6 percent) (exhibit 3).

The prevalence of methamphetamine-positive urine tests among adult arrestees in San Diego County declined from 2005 to 2008. In 2009, this downward trend appeared to show signs of reversal, and this increase appeared to continue into 2013. Among adult males, the prevalence increased from 31 percent in 2012 to 41 percent in 2013. In addition, methamphetamine prevalence among juvenile arrestees more than doubled, from 4 percent in 2012 to 10 percent in 2013. Among females, the prevalence decreased 1 percentage point, from 47 percent in 2012 to 46 percent in 2013 (exhibit 4).

Methamphetamine continued to rank first among drug reports from items seized and analyzed in NFLIS laboratories in San Diego County, with 5,343 reports (representing 44 percent of all primary, secondary, and tertiary reports) (exhibit 5).

Methamphetamine prices appeared to decrease in 2013. The price for a gram of methamphetamine was \$60–\$80 in 2013, compared with \$80–\$100 in 2012. The price for an ounce of methamphetamine in 2013 was \$400–\$1,200, compared with \$900–\$1,200 in 2012 (exhibit 6).

There were 169 overdose deaths involving amphetamine (including methamphetamine) in 2013 (5.4 per 100,000 population), compared with 116 in 2012 (3.7 per 100,000). This continued a longer term increase since 2008, when 83 overdose deaths were recorded (2.7 per 100,000) (exhibit 7).

Marijuana

Marijuana indicators showed signs of increasing in 2013, with increases among adult and juvenile arrestees and decreases in street prices. Data on primary treatment admissions for marijuana were not available for this reporting period, but the number of primary treatment admissions for marijuana was relatively unchanged in the previous reporting period (2012), representing 18.0 percent of admissions (exhibits 2 and 3). Similar to previous years, in 2012, three-quarters of the admissions were male (74.4 percent). The proportion of admissions in the younger-than-18 age group has been decreasing since 2010. In 2012, 45.1 percent of primary marijuana admissions were younger than 18, compared with 50.8 percent in 2011 and 54.7 percent in 2010. Hispanics were overrepresented, constituting 46.1 percent of marijuana admissions. Sixty-five percent of marijuana clients reported

at least one secondary drug of abuse. Alcohol was the most commonly reported (39.1 percent), followed by methamphetamine (16.8 percent) and cocaine (2.8 percent).

The proportion of arrestees with urinalysis-positive tests for marijuana in 2013 showed increases in all three subgroups (exhibit 4). In 2013, 48 percent of adult males tested positive for marijuana, a 6-percentage-point increase from 2012. Among adult females, 34 percent tested positive for marijuana in 2013, compared with 30 percent 2012. Among juveniles, 53 percent tested positive for marijuana in 2013, compared with 48 percent in 2012.

Of the drug reports from seized items analyzed in NFLIS forensic laboratories in 2013, 12 percent ($n=1,410$ reports) were identified as marijuana (exhibit 5), compared with 18 percent ($n=2,355$ reports) in 2012 and 29 percent ($n=4,477$ reports) in 2011. Marijuana/cannabis ranked third among total reports from items analyzed in NFLIS laboratories, after methamphetamine and cocaine.

Prices for marijuana decreased in 2013. The price for a one-quarter ounce of domestic marijuana was \$80–\$100, compared with \$100–\$120 in 2012. The price for 1 ounce also decreased, from \$200–\$320 in 2012 to \$150–\$330 in 2014 (exhibit 6).

MDMA (Ecstasy)

In the previous reporting period (2012) there were 17 primary treatment admissions for ecstasy or MDMA (3,4-methylenedioxymethamphetamine), down from 39 in 2011 and 54 in 2010 (data not shown). MDMA admissions were 52.9 percent male. MDMA admissions were ethnically diverse: 29.4 percent were White non-Hispanic and 17.6 percent each were African-American, Asian, and Hispanic. Seventy percent were younger than 26.

There were 75 reports identified as MDMA among drug items seized and analyzed in NFLIS forensic laboratories in 2013 in San Diego County, representing less than 1.0 percent of all reports. MDMA ranked 14th among drug reports in the NFLIS data.

Among juvenile arrestees, the proportion reporting ever trying ecstasy was stable at 34 percent in 2012 and 2013, while the proportion of those who had used ecstasy in the past year decreased by 1-percentage-point, from 37 to 36 percent. The prevalence of self-reported lifetime ecstasy use among adult males increased from 27 percent in 2012 to 31 percent in 2013. Among adult females arrestees, the prevalence of self-reported lifetime ecstasy use increased from 32 percent in 2012 to 37 percent in 2013 (data not shown).

Alcohol

In the previous reporting period (2012) there were 3,059 primary treatment admissions (21.3 percent) for alcohol in 2012. Clients admitted for alcohol were predominantly male (67.5 percent), White non-Hispanic (56.5 percent), and age 35 or older (60.9 percent). Forty-three percent of primary alcohol admissions cited no secondary drug of abuse. Marijuana was the secondary drug in 26.0 percent of cases, followed by methamphetamine (17.8 percent) and cocaine/crack (6.8 percent) (exhibit 3).

INFECTIOUS DISEASES RELATED TO DRUG ABUSE

AIDS

Data on HIV/AIDS for San Diego County are reported biennially, with the most recent report issued in 2012 and covering the period through December 31, 2011. In 2011, San Diego County ranked third among California counties in terms of the number of HIV and AIDS cases. There were 14,805 cumulative AIDS cases in San Diego County as of December 31, 2011, including 7,221 currently living with AIDS. There were 251 new cases reported in 2011, although this number was expected to increase in 2012 due to reporting delays. Eight percent of adult/adolescent AIDS diagnoses were among females. This represents a much smaller proportion than in the United States as a whole, where 20 percent of AIDS cases are among females, but it is consistent with the State of California, where 9 percent of AIDS cases are among females.

Among males, 7 percent of AIDS cases were attributable to injection drug use, while 11 percent are among men who have sex with men (MSM) who were also injection drug users (IDUs). Among females, 33 percent of AIDS cases were among IDUs for the period 1981–2011. In the more recent reporting period (2007–2011), the proportion of female cases attributable to injection drug use was 22 percent, which represents a decline from a high of 42 percent in 1997–2001. Among female cases attributable to heterosexual transmission from 1981 to 2011 (56 percent of total cases), 19 percent of cumulative cases are attributable to sex with an IDU. In more recent years (2007–2011), this proportion also decreased, to 10 percent.

In terms of race/ethnicity, there was evidence of shifts in the demographic makeup of injection-related cases over time for both genders. Overall, African-American males represent a larger proportion of IDU cases and a smaller proportion of MSM cases than Whites or Hispanics. The proportion of AIDS cases attributed to injection drug use among White males in 1987–1991 was 2 percent, which increased to 6 percent in the more recent period 2007–2011. Among African-American and Hispanic males, the proportion of cases attributed to injection drug use decreased during the two time periods (from 17 to 10 percent among African-Americans, and from 8 to 6 percent among Hispanics). The trends in the MSM/IDU group were similar, with increases among Whites (from 9 to 13 percent) and decreases among African-Americans (from 15 to 10 percent) and Hispanics (from 8 to 7 percent). It should be noted that these reductions among African-Americans and Hispanics were offset by increases in cases attributed to heterosexual transmission.

Among females, similar trends in the racial/ethnic distribution were observed. The proportion of AIDS cases attributed to injection drug use among White females in 1987–1991 was 28 percent and increased to 35 percent in 2007–2011. Among African-American females, the proportion of cases attributable to injection drug use decreased from 56 to 21 percent, and among Hispanic females, the proportion decreased from 29 to 14 percent. As with males, there were substantial increases in the proportion of cases attributable to heterosexual transmission, which could include sex with an IDU.

HIV

In 2006, the State of California transitioned to names-based reporting of HIV cases, consistent with recommendations from the Centers for Disease Control and Prevention (CDC). Effective April 2006, the State stopped reporting updated statistical information on HIV cases reported before

implementation of the names-based system. Accordingly, cumulative HIV case counts now reflect unduplicated HIV case counts reported by name to the California Department of Health Services, Office of AIDS, beginning April 17, 2006. From April 17, 2006, through December 31, 2011, there were 4,910 cumulative HIV cases in San Diego County. Ninety percent of HIV diagnoses ($n=4,436$) were male. African-Americans had the highest HIV incidence rate (22 per 100,000 population), followed by Hispanics (10 per 100,000) and Whites (7 per 100,000). The average age at HIV diagnosis was 34.

Among males, 4 percent of cumulative HIV cases through 2011 were attributable to injection drug use, and 7 percent were among MSM/IDUs. In terms of race/ethnicity, IDUs accounted for 6 percent of White male cases in the most recent time period (2007–2011). This compares with 9 percent of African-American male cases in 2007–2011 and 4 percent among Hispanic males. This represents an increase among White and African-American males and stability among Hispanic males.

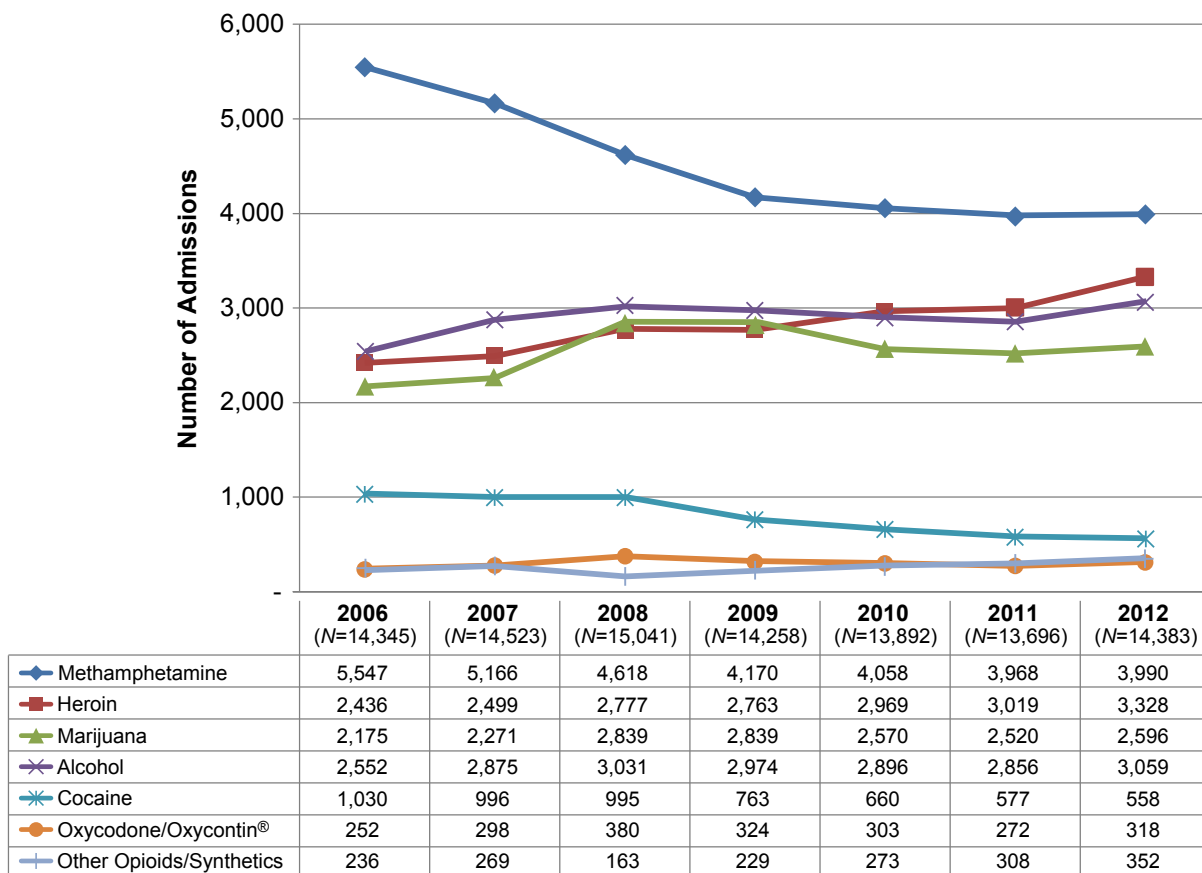
Among females, 22 percent of cumulative HIV cases through 2011 were attributable to injection drug use. Among the heterosexual transmission cases, which represented 72 percent of cases overall, 11 percent were attributable to sex with an IDU. IDUs accounted for 27 percent of White female cases in 2007–2011, for 9 percent of African-American female cases, and for 16 percent of Hispanic female cases. Substantial decreases were observed for White and African-American (but not Hispanic) females when comparing the 2007–2011 reporting period with 2002–2006.

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Exhibit 1. San Diego County Demographics, by Percentage: 2010

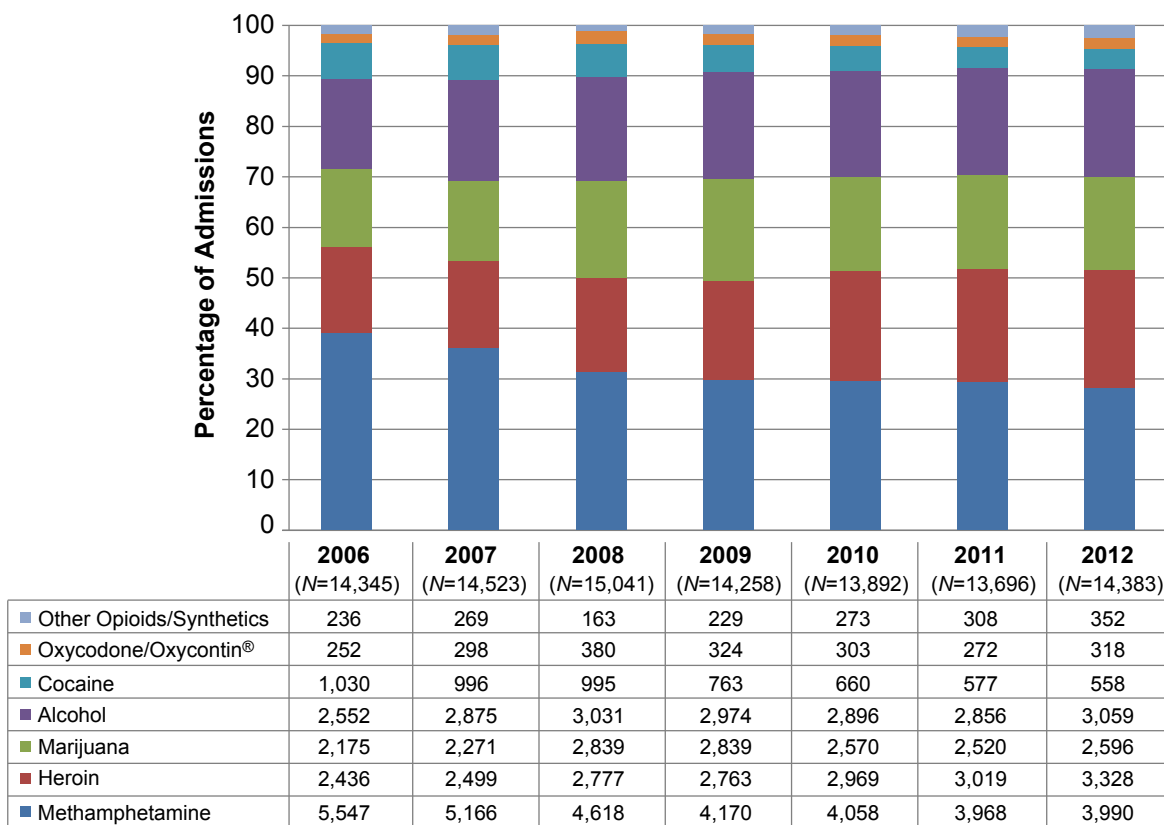
Race/Ethnicity	Percentage of the Population
White	48
Black or African-American	5
Asian/Pacific Islander	11
American Indian	<1
Other Race	3
Hispanic/Latino	32
Median Household Income (Current \$)	\$62,771
2010 Population	(N=3,095,313)

SOURCE: San Diego Association of Governments, http://www.sandag.org/resources/demographics_and_other_data/demographics/fastfacts/regi.htm

Exhibit 2a. Number of Treatment Admissions, by Primary Drug, San Diego County: 2006–2012

NOTE: Chart excludes ecstasy and "Other."

SOURCE: California Outcomes Measure System (CalOMS)

Exhibit 2b. Percentage of Treatment Admissions, by Primary Drug, San Diego County: 2006–2012

NOTE: Charts exclude ecstasy and "Other."

SOURCE: California Outcomes Measure System (CalOMS)

Exhibit 3. Characteristics of Clients Admitted to Treatment, by Numbers and Percentage, San Diego County: 2012

Characteristics	Alcohol	Cocaine/ Crack	Heroin	Other Opiates	Marijuana	Metham- phetamine Only	All Other	Total
Total N (%):	3,059 (21.3)	558 (3.9)	3,328 (23.1)	670 (4.7)	2,596 (18.0)	3,990 (27.7)	182 (1.3)	14,383 (100.0)
Gender								
Male	2,066 (67.5)	377 (67.6)	2,358 (70.9)	367 (54.8)	1,932 (74.4)	2,317 (58.1)	124 (68.1)	9,541 (66.3)
Female	993 (32.5)	181 (32.4)	970 (29.1)	303 (45.2)	664 (25.6)	1,673 (41.9)	58 (31.8)	4,842 (33.6)
Unknown	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Age at Admission								
17 and Younger	172 (5.6)	*	27 (0.8)	*	1,172 (45.1)	88 (2.2)	34 (18.7)	1,493 (10.4)
18–25	374 (12.2)	*	1,064 (31.9)	100 (14.9)	610 (23.5)	675 (16.9)	*	2,865 (19.9)
26–34	650 (21.2)	86 (16.9)	1,102 (33.1)	252 (37.6)	430 (16.6)	1,318 (33.0)	53 (29.1)	3,692 (25.6)
35 and Older	1,863 (60.9)	420 (75.3)	1,135 (34.1)	307 (45.8)	384 (14.8)	1,909 (47.8)	53 (29.1)	5,817 (40.4)
Unknown	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Race/Ethnicity								
White Non-Hispanic	1,728 (56.5)	105 (18.8)	2,109 (63.4)	496 (74.0)	744 (28.7)	1,955 (49.0)	68 (37.4)	7,205 (50.0)
African-American	369 (12.1)	360 (64.5)	76 (2.3)	25 (3.7)	420 (16.2)	232 (5.8)	34 (18.7)	1,516 (10.5)
American Indian	47 (1.5)	*	38 (1.1)	*	24 (0.9)	31 (0.8)	*	140 (0.9)
Asian/Pacific Islander	34 (1.1)	*	35 (1.1)	*	41 (1.6)	183 (4.6)	*	293 (2.0)
Hispanic	757 (24.7)	75 (13.4)	938 (28.2)	92 (13.7)	1,198 (46.1)	1,392 (34.9)	50 (27.5)	4,502 (31.3)
Other/Multidrug	121 (4.0)	*	126 (3.8)	31 (4.6)	163 (6.3)	180 (4.5)	17 (9.3)	638 (4.4)
Route of Administration								
Smoking	0 (0)	431 (77.2)	830 (24.9)	17 (2.5)	2,566 (98.8)	2,887 (72.4)	80 (44.0)	6,811 (47.3)
Sniffing/Inhaling	0 (0)	96 (17.3)	81 (2.4)	47 (7.0)	*	288 (7.2)	*	512 (3.5)
Injection	0 (0)	*	2,385 (71.7)	21 (3.1)	0 (0)	754 (18.9)	*	3,177 (22.0)
Oral	3,059 (100)	*	28 (0.8)	580 (86.6)	*	61 (1.5)	90 (49.5)	3,844 (26.7)
Other/Not Given	0 (0)	*	*	0 (0)	0 (0)	0 (0)	*	0 (0)

Exhibit 3 (continued). Characteristics of Clients Admitted to Treatment, by Numbers and Percentage, San Diego County: 2012

Characteristics	Alcohol	Cocaine/ Crack	Heroin	Other Opiates	Marijuana	Metham- phetamine Only	All Other	Total
Total N (%):	3,059 (21.3)	558 (3.9)	3,328 (23.1)	670 (4.7)	2,596 (18.0)	3,990 (27.7)	182 (1.3)	14,383 (100.0)
Secondary Drug								
None	1,299 (42.5)	168 (30.1)	1,265 (38.0)	327 (48.8)	898 (34.6)	1,391 (34.9)	41 (22.5)	5,389 (37.4)
Alcohol	—	172 (30.8)	265 (8.0)	54 (8.1)	1,015 (39.1)	941 (23.6)	27 (14.8)	2,474 (17.2)
Cocaine/Crack	208 (6.8)	—	179 (5.4)	21 (3.1)	72 (2.8)	131 (3.3)	*	611 (4.2)
Heroin	71 (2.3)	17 (3.0)	—	56 (8.4)	43 (1.7)	278 (7.0)	*	465 (3.2)
Other Opiates	47 (1.5)	*	84 (2.5)	55 (8.2)	*	39 (1.0)	23 (12.6)	248 (1.7)
Marijuana	795 (26.0)	126 (22.6)	374 (11.2)	56 (8.4)	—	1,126 (28.2)	56 (30.8)	2,533 (17.6)
Methamphetamine	545 (17.8)	54 (9.7)	907 (27.3)	36 (5.4)	435 (16.8)	—	*	1,977 (13.7)
All Other	80 (2.6)	16 (2.9)	140 (4.2)	79 (11.8)	88 (3.4)	72 (1.8)	—	475 (3.3)

Note: * indicates cell sizes of fewer than 15 cases, masked at the request of the California State Alcohol and Drugs Program. In columns where one cell contains fewer than 15 cases, the second smallest cell is also masked.

SOURCE: California Outcomes Measurement System (CalOMS)

Exhibit 4. Percentage of Positive Tests for Illicit Drugs Among Adult and Juvenile Arrestees, San Diego County: 2006–2013

	2006	2007	2008	2009	2010	2011	2012	2013
Methamphetamine								
Male Adults	36	24	20	22	25	26	31	41
Female Adults	47	44	31	39	33	39	47	46
Juveniles	10	8	10	6	8	4	4	10
Cocaine								
Male Adults	13	11	8	7	6	6	8	6
Female Adults	21	16	12	11	11	7	5	7
Juveniles	5	3	2	1	2	2	3	1
Heroin/Opiates								
Male Adults	5	6	6	6	10	9	10	11
Female Adults	8	8	7	8	10	9	12	14
Juveniles	1	1	1	1	5	2	3	1
Marijuana								
Male Adults	40	37	36	37	39	39	42	48
Female Adults	31	29	26	28	29	31	30	34
Juveniles	43	40	44	51	43	51	48	53

SOURCE: San Diego Association of Governments, Substance Abuse Monitoring Program

Exhibit 5. Number and Percentage of Primary, Secondary, and Tertiary Reports Among Drug Items Analyzed by Forensic Laboratories, San Diego County: 2013

Rank	Drug	Number	Percentage
1	Methamphetamine	5,343	44.3
2	Cocaine	1,424	11.8
3	Marijuana/Cannabis	1,413	11.7
4	Heroin	1,367	11.3
5	Hydrocodone	342	2.8
6	Alprazolam	213	1.8
7	Oxycodone	190	1.6
8	Phenylimidothiazole Isomer Undetermined (Possible Levamisole)	148	1.2
9	Dimethylsulfone	108	0.9
10	Clonazepam	93	0.8
	All Other Drugs	1,429	11.8
Total		12,070	100.0

SOURCE: NFLIS, DEA, preliminary data retrieved in May 2014; data are subject to change

Exhibit 6. Retail Prices for Selected Drugs, San Diego County: 2007–2013

Drug	2007	2008	2009	2010¹	2011¹	2012¹	2013¹
Cocaine							
One-Quarter Gram	\$50–\$100	\$50–\$100	\$50–\$100	\$25–\$30	N/A	N/A	N/A
Gram	\$60–\$150	\$60–\$150	\$60–\$150	\$80–\$100	\$75–\$100	\$75–\$100	\$50–\$70
Ounce	\$600– \$1,000	\$600– \$1,000	\$700– \$1,000	\$800– \$1,200	\$700– \$1,200	\$600– \$1,200	\$600– \$1,400
Pound	\$6,000– \$10,000	\$8,000– \$10,000	\$8,000– \$10,000	\$8,000– \$10,000	\$8,000– \$11,000	\$8,000– \$11,500	\$12,000– \$13,000
Heroin (Black Tar)							
One-Quarter Gram	\$25–\$40	\$15–\$50	\$15–\$50	\$25–\$35	\$25–\$30	\$25–\$40	\$20–\$25
Gram	\$80	\$80–\$100	\$60–\$80	\$80–\$100	\$80–\$100	\$80–\$100	\$50–\$100
Ounce	\$600	\$600– \$1,200	\$600– \$1,200	\$700– \$1,200	\$700– \$1,200	\$700– \$1,200	\$600–\$900
Pound	\$17,000	\$10,000– \$17,000	\$8,000– \$10,000	\$8,000– \$12,000	\$8,000– \$12,000	\$10,000– \$14,000	\$8,000– \$12,000
Marijuana							
One-Quarter Ounce	\$30–\$50	\$40–\$100	\$40–\$100	N/A	N/A	\$100–\$120	\$80–\$100
Ounce	\$80–\$100	\$80–\$150	\$60–\$100	\$80–\$120 ²	\$300–\$400 ²	\$200–\$320 ²	\$150–\$330
Pound	\$250–\$300	\$300–\$400	\$400–\$600	\$400–\$600	\$400–\$600	\$2,500– \$3,200	\$800– \$3,300
Methamphetamine							
One-Quarter Gram	\$20–\$25	\$20–\$25	\$20–\$50	\$25–\$40	\$25–\$40	\$20–\$30	\$20
Gram	\$50–\$100	\$75–\$100	\$75–\$100	\$80–\$120	\$80–\$120	\$80–\$100	\$60–\$80
Ounce	\$750– \$1,000	\$500– \$1,500	\$500– \$1,500	\$750– \$1,200	\$750– \$1,200	\$900– \$1,200	\$400– \$1,200
Pound	\$9,000– \$12,500	\$10,000– \$20,000	\$8,000– \$15,000	\$15,000– \$20,000	\$15,000– \$20,000	\$15,000– \$20,000	\$4,000– \$10,000

¹Data for 2010 come from the July 2010 report. Data for 2011 come from the January 2012 report. Data for 2012 come from the January 2013 report. Data for 2013 come from the January 2014 report.

²Price data for marijuana in 2010 were reported for “Mexican” marijuana, while price data in 2011 were reported as “low-grade” marijuana, and the 2012 price data were reported for “Domestic” marijuana in the Law Enforcement Coordination Center Street Drugs Price List. For 2013, price data were reported as “Domestic.”

SOURCE: San Diego Law Enforcement Coordination Center Street Drugs Price List

Exhibit 7. Number and Rate of Deaths Due to Drug Overdose Involving Amphetamine and/or Heroin/Morphine, San Diego County: 2001–2013

Year	Amphetamine-Involved Drug Deaths		Heroin/Morphine-Involved Drug Deaths	
	Number	Rate ¹	Number	Rate ¹
2001	58	2.03	107	3.76
2002	93	3.22	129	4.46
2003	99	3.38	116	3.96
2004	105	3.55	87	2.95
2005	113	3.81	90	3.03
2006	90	3.02	84	2.82
2007	100	3.34	109	3.64
2008	83	2.74	105	3.46
2009	88	2.87	118	3.85
2010	115	3.72	105	3.39
2011	119	3.82	118	3.79
2012	116	3.69	114	3.63
2013	169	5.36	129	4.10

¹Rates per 100,000 population were re-calculated for previous years in 2012, based on most recent population estimates.

SOURCE: County of San Diego Health and Human Services Agency, Emergency Medical Services Medical Examiner Database